

PD600004065/

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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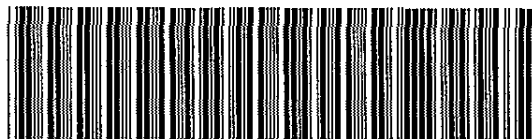
Certificates of Status _____

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03/20/06 - 01078--014 **70.00

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06 MAR 20 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Professional Chiropractic Society of America, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for :

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

as well as a Sworn Statement by Owner Peter G. Fernandez

FROM: Peter G. Fernandez
10733 57th Avenue N
Seminole FL 33772
727-392-0822

NOTE: Please provide the original and one copy of the articles.

SWORN STATEMENT BY OWNER PETER G. FERNANDEZ

1. My name is Dr. Peter G. Fernandez, and I am president and sole owner of Professional Chiropractic Society of America, Inc., No. NO2000004457 (herein called "PCSA")
2. PCSA is currently an administratively dissolved non-profit corporation. I wish to open a for-profit corporation by the same name.
3. It is my intent to do business forthwith under a for-profit corporation called Professional Chiropractic Society of America, Inc. I do not intend to use this name again for a non-profit corporation.
4. Articles of Incorporation for a for-profit corporation under this name are submitted with this affidavit as well as a check for \$70.00 to cover the incorporation

I hereby swear under penalty of perjury that the foregoing is true and correct.


Dr. Peter G. Fernandez

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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06 MAR 20 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Professional Chiropractic Society of America, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10733 57th Avenue N, Seminole FL 33772

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All lawful purposes.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Dr. Peter G. Fernandez, President and Director
10733 57th Avenue N, Seminole FL 33772

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

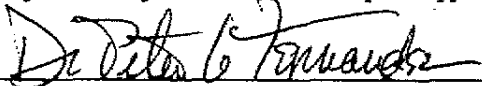
Dr. Peter G. Fernandez
10733 57th Avenue N, Seminole FL 33772

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dr. Peter G. Fernandez
10733 57th Avenue N, Seminole FL 33772

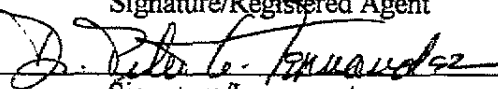
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

3-17-06

Date



Signature/Incorporator

3-17-06

Date